

LOBBYING REGISTRATION FORM

To be used for initial registrations and renewals.
Registrations expire on January 31 unless a renewal is submitted between December 1 and January 31.

Lobbyist's Registration Number

Instructions

- Print in ink or type.
- Complete form, have it notarized and return with \$10 registration fee to the Board of Ethics, 8401 United Plaza Blvd., Suite 200 Baton Rouge, LA 70809-7017, (504) 922-1400.
- Initial registrations must be submitted within 5 days of (1) employment as a lobbyist or (2) first action requiring registration. Renewals must be submitted between December 1 and January 31.

FOR OFFICE USE ONLY

Postmark Date: 11/30/98

REC

1980397

1. NAME Harper Patricia Thomas
Last First MI
2. BUSINESS PHONE 318-681-6702
Area Code and Phone Number
3. BUSINESS ADDRESS One St. Mary Place Shreveport, LA 71101
Street and No. City State Zip
4. EMPLOYER Sisters of Charity Schumpert Health System
5. EMPLOYER'S ADDRESS One St. Mary Place, Shreveport, LA 71101
Street and No. City State Zip
6. LIST BELOW (a) Names of persons, groups, or organizations which you represent; (b) the address of each such person, group, or organization you represent; (c) the type of business each is engaged in or the purpose or function of the organization or group; (d) whether or not the client or someone else pays you to lobby.
1. Name Sisters of Charity Health System
Address 2600 North Loop West, Houston, Texas 77292
Business or purpose Health System
Does this person pay you? NO
If No, who pays you? Sisters of Charity Schumpert Health System
2. Name Sisters of Charity Schumpert Health System
Address One St. Mary Place, Shreveport, LA 71101
Business or purpose Health Care Provider
Does this person pay you? YES
If No, who pays you? _____

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477
Lobbyist's Registration Number

3. Name _____
 Address _____
 Business or purpose _____
 Does this person pay you? _____
 If No, who pays you? _____
4. Name _____
 Address _____
 Business or purpose _____
 Does this person pay you? _____
 If No, who pays you? _____
5. Name _____
 Address _____
 Business or purpose _____
 Does this person pay you? _____
 If No, who pays you? _____

State of LOUISIANA

Parish of CADDO

Before me, the undersigned authority, personally came and appeared PATRICIA THOMAS HARPER, who, after being duly sworn by me, did declare and acknowledge to me that the above statements are true and correct.

Patricia Thomas Harper
 Signature of Lobbyist

Sworn to and subscribed before me on this 28 day of

January, 1998.

Nelson C. Donald

Notary Public

HELEN C. DONALD

NOTARY PUBLIC - Caddo/Bossier Parish
 COMMISSION EXPIRES - LIFE

Rev. 8/97

ATTACH
 2" x 2"
 PHOTOGRAPH
 HERE
 FOR
 INITIAL
 REGISTRATION
 ONLY

